COMBINED DECLARATION / POWER OF ATTORNEY

ATTORNEY DOCKET NO.:010430

AS BELOW NAMED INVENTOR, I HEREBY D	ECLARE THAT: This Deck	eration is of the follow	ing type:	
Original Supp		Continuation-In-Part Vational Stage of PCT	☐ Divisional	I
My residence, post office address and citizenship a one name is listed below) or an original, first and j which a patent is sought on the invention PROXY NETWORK the specification of which:	oint inventor (if plural name	s are listed below) of t	he subject matter which is	claimed and for
is attached hereto. was filed on as Serial No. was amended on (if applicable). was described and claimed in PCT Internation	nal Application No. fi	led on and as a	nended under PCT Article	19 on .
I hereby state that I have reviewed and understand amendment referred to above. I acknowledge th accordance with Title 37, Code of Federal Regulati	e duty to disclose informati			
I hereby claim foreign priority benefits under Ti- certificate or of any PCT International application have also identified below any foreign application least one country other than the United States of application(s) of which priority is claimed.	(s) designating at least one of (s) for patent or inventor's of	ountry other than the certificate or any PCT	United States of America International application(s or having a filing date be	tisted below and s) designating at fore that of the
2004. 1			Priority C	laimed
(Country) (Application	n No.) (Day/	Month/Year/Filed)	(Yes)	(No)
I hereby claim the benefit under Title 35 USC 120				
I hereby claim the benefit under Title 35 USC 120 the claims of this application is not disclosed in t USC 11., I acknowledge the duty to disclose mate the prior application and the national or PCT International	he prior United States applicated information as defined in	cation in the manner p in Title 37 CFR 1.56(a)	provided by the first parag	raph of Title 35
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